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Bib Data Sheet

CONFIRMATION NO. 8050

SERIAL NUMBER 09/606,692	FILING OR 371(c) DATE 06/30/2000 RULE	CLASS 370	GROUP ART UNIT 2665	ATTORNEY DOCKET NO. 95-430
APPLICANTS James Alan Craig, Little Silver, NJ; Kelly Wycall Phillips, Richmond, VA; Narasimha K. Nayak, Glen-Allen, VA;				
** CONTINUING DATA ***** This application is a CIP of 09/479,235 01/07/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/25/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials	STATE OR COUNTRY NJ	SHEETS DRAWING 3	TOTAL CLAIMS 40
INDEPENDENT CLAIMS 4				
ADDRESS Leon R Turkevich Esquire 2000 M Street N W 7th Floor Washington ,DC 20036-3307				
TITLE Scalable voice over IP system providing independent call bridging for outbound calls initiated by user interface applications				
FILING FEE RECEIVED 1280	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Bib Data Sheet

SERIAL NUMBER 09/606,692	FILING DATE 06/30/2000 RULE -	CLASS 712	GROUP ART UNIT 2782	ATTORNEY DOCKET NO. 95-430
APPLICANTS James Alan Craig, Little Silver, NJ ; Kelly Wycall Phillips, Richmond, VA ; Narasimha K. Nayak, Glen Allen, VA ; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/25/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>MP</u> Examiner's Signature Initials		STATE OR COUNTRY NJ	SHEETS DRAWING 3	TOTAL CLAIMS 40
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